02//4/01 SERIAL NO. OG 15 1000 MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) CLAIMS AFTER 1st AMENDMENT AFTER 2nd AMENDMENT AS FILED IND. DEP. IND. DEP. IND. DEP. DEP. IND. DEP. IND. DEP. IND. 1 51 2 52 3 53

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